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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A CIP OF 09/545,701 04/07/2000

*Yes* *DS*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

*None* *DS*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 04/18/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
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Verified and Acknowledged	<i>Unmark</i> Examiner's Signature <i>HS</i> Initials
STATE OR COUNTRY	CA
SHEETS DRAWING	10
TOTAL CLAIMS	20
INDEPENDENT CLAIMS	4

**ADDRESS**

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**TITLE**

System, apparatus and method for preserving data

FILING FEE RECEIVED 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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